



HEALTH HOLDING

HAFER ALBATIN HEALTH
CLUSTER
MATERNITY AND
CHILDREN HOSPITAL

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|--------------------------|-------------------------------------------------------------|-------------------------|---------------|
| Department: | Laboratory and Blood Bank | | |
| Document: | Internal Policy and Procedure | | |
| Title: | Receiving/Sending Blood Products From/To Outside Facilities | | |
| Applies To: | All Blood Bank Staff | | |
| Preparation Date: | August 06, 2024 | Index No: | LB-IPP-203 |
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1. PURPOSE:

- 1.1 To ensure adequate supplies of blood & blood components for routine and emergency situations.
- 1.2 To ensure effective management of blood stocks without outdating.

2. DEFINITONS:

- 2.1 N/A

3. POLICY:

- 3.1 The blood bank accept blood from accredited governmental supplier in case of need.
- 3.2 The blood bank may receive back, from governmental hospitals, into the blood component inventory those units that meet acceptance specifications.
- 3.3 Any unit of blood or its component dispatched to the private hospitals cannot be accepted back into the blood component inventory at all for any reason.
- 3.4 The process of requesting or releasing blood from or to outside facilities depends on blood bank inventory.
- 3.5 Requesting, shipping and receiving of blood components is documented through hematos system .
- 3.6 MCH blood bank releases the requested component to outside facilities without any responsibility about delay in shipping, storage or cross matching.
- 3.7 Any post transfusion infection occurs in outside facilities must be reported to supplier blood bank to be investigated and for lookback.
- 3.8 The received blood components from other blood banks are not allowed to be issued to a third blood bank (except in severe emergency).
- 3.9 Any dispute must be resolved before using the blood component.
- 3.10 There are written blood supply/exchange agreements with outside facilities covering the following:
 - 3.10.1 Agreement conditions (including accreditation status).
 - 3.10.2 Agreement on adequate blood/blood components inventory.
 - 3.10.3 Role of the involved parties in look back and transfusion transmitted diseases investigation.
 - 3.10.4 Release of blood, blood components or information to a third party.
 - 3.10.5 Validity of agreement and agreement review schedule.
 - 3.10.6 Resolving disputes.
- 3.11 There is a written procedure describing the process for requesting or releasing blood from or to outside facilities.
- 3.12 On receipt, inspection of incoming blood/blood components include:
 - 3.12.1 Evaluation and verification of the shipping condition of each blood component.
 - 3.12.2 Checking for meeting predefined acceptance criteria for each blood component received.
 - 3.12.3 Evaluation and verification of the agreement of units' identification information (unit numbers, ABO/Rh-D and Expiration dates).
The received units must be entered to MCH stock on hematos system by using patient access then select stock entry then select the product then scan donation number then enter the data

- number of the bag after that the data of bag will appear automatically on the system
- 3.12.4 Conformation of ABO/Rh-D for RBC components.
- 3.12.5 Actions taken for unsatisfactory consignment.

3.13 Assessment of this policy must be done regularly and regulations of health affairs must be followed strictly.

4. PROCEDURE:

4.1 Shipping of blood components:

4.1.1 Shipping procedure is to be followed as described in "blood/blood component storage, transport, and shipping" chapter (LB-IPP-202).

4.2 Requesting of blood components:

4.2.1 Once the stock of tested blood units available in the blood bank is reduced below the minimal recommended number or a specific blood group or component is required, blood bank staff arranges with accredited governmental hospital and sends 'request of blood from other hospitals' to the hospital to get the needs.

4.2.2 On the 'request of blood from other hospital', record the followings:

4.2.2.1 The component type (s), blood group (s), and the amount needed.

4.2.2.2 The name of the hospital which supply the component.

4.2.2.3 Name, and signature of the person who request the unit (s).

4.2.2.4 The date and time of the request.

4.2.3 After calling the shipping driver, give him a validated transport container with some types of refrigerants when required (according to the component requested). Ask him to go to the supplier as soon as he can and to follow the shipping instructions. A porter or lab technician may accompany the shipping driver. A lab technician or assistance may perform the whole job (as per availability).

4.2.4 The process of unit requesting or exchange with other hospitals is regulated through the Director/blood banks coordinator or his designee in Hafr Al Batin Central Laboratory And Blood Bank.

4.2.5 The outside Blood banks include:

4.2.5.1 Hafr Al Batin Central Laboratory And Blood Bank.

4.2.5.2 King Khalid General Hospital (KKGH).

4.2.5.3 Hafr Al Batin Central Hospital (HCH).

4.2.5.4 Other governmental hospitals through Hafr Al Batin Central Laboratory And Blood Bank.

4.3 **Receiving of blood components:** On receiving of incoming blood component, the following must be done:

4.3.1 Evaluation and verification of the shipping condition of each blood component e.g. the presence of residual ice in the box according the type of the component.

4.3.2 Checking for meeting predefined acceptance criteria for each blood component received. The unit should be inspected for:

4.3.2.1 Expiry (or collection) date.

4.3.2.2 The integrity of the bag: check for leaks.

4.3.2.3 Evidence of unusual discoloration (segments appearing lighter or darker in color than the primary bag contents, purple color to the red cells or cloudiness), gross lipaemia.

4.3.2.4 The presence of large clots, white particulate matter in the primary container.

4.3.2.5 Grossly visible aggregates in platelet concentrate.

4.3.3 Evaluation and verification of the agreement of units' identification information on both the component unit and the 'Dispense of blood and blood components to outside facilities' form:

4.3.3.1 Unit numbers and ABO/Rh-D.

4.3.3.2 Expiration dates.

4.3.3.3 Quantity of the product.

4.3.3.4 Transfusion transmitted disease (TTD) negative result label. Safety certificate should

- accompany the received products.
- 4.3.4 Review the followings on the 'Dispense of blood and blood components to outside facilities' form:
 - 4.3.4.1 Interpretation of compatibility tests, if performed.
 - 4.3.4.2 The names and signatures of the persons who issues and ships the components.
 - 4.3.4.3 The temperature of the component before shipping.
 - 4.3.4.4 The date and time of issue.
 - 4.3.4.5 Special requirements (e.g. antigen negative unit).
 - 4.3.5 If all checks are correct, the unit is received into blood bank inventory.
 - 4.3.6 Record the following on the 'Dispense of blood and blood components to outside facilities' form:
 - 4.3.6.1 Temperature of the unit.
 - 4.3.6.2 Date and time of receiving.
 - 4.3.6.3 The name of the staff who receive the product.
 - 4.3.6.4 The condition of the unit.
 - 4.3.7 Any and all discrepancies must be resolved before using the component (s).
 - 4.3.8 Fix the 'Dispense of blood and blood components to outside facilities' form with a copy of 'request of blood from other hospitals' form. Keep all documents in their specified files.
 - 4.3.9 Actions taken for unsatisfactory consignment:
 - 4.3.9.1 Notify the sending facility of any unacceptable condition.
 - 4.3.9.2 If indicated, the units may be sent back to the sending facility.
- 4.4 **Return of blood components** (only from accredited governmental hospitals):
- 4.4.1 The blood bank may receive back into the blood component inventory those units that meet acceptance specifications.
 - 4.4.2 These conditions include the following:
 - 4.4.2.1 The primary container has not been entered.
 - 4.4.2.2 The appropriate temperature has been maintained and the component has been returned within a prescribed time frame from issue.
 - 4.4.2.3 At least one sealed segment remains integrally attached to the container of RBCs.
 - 4.4.2.4 Visual inspection of the component is satisfactory.
 - 4.4.3 Platelets returned to the blood bank greater than 30 minutes from issue may be placed back into inventory following a visual inspection of the component. The platelet bag can be held in front of a light source and gently squeezed to check the "swirling" appearance of the platelets. If "swirling" is evident and there is no visible clumping of the platelets, they are returned into inventory. The platelet component should be agitated for at least 10 minutes before reissue.
 - 4.4.4 If the criteria are not met, the component discarded in a biohazard container.
 - 4.4.5 Documentation of all acceptable or unacceptable conditions must be carried out.

5. MATERIALS AND EQUIPMENT:

5.1 Forms and Records:

- 5.1.1 Dispense of blood and blood components to outside facilities form/record.
- 5.1.2 Requests of blood from other hospitals form.
Hematos software for blood bank

5.2 Materials:

- 5.2.1 Calibrated thermometers
- 5.2.2 Cooler box
- 5.2.3 Cooler transport container
- 5.2.4 Ice packs
- 5.2.5 Dry ice (as per availability)

6. RESPONSIBILITIES:

- 6.1 Blood Bank technicians/ specialists to follow the detailed procedure.






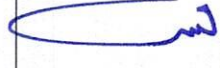
7. APPENDICES:

7.1 N/A

8. REFERENCES:

- 8.1 The Unified Practical Procedure Manual For Blood Banks In The Arab Countries, 1434-2013.
- 8.2 The Standard Policy For Blood Banks In The Kingdom Of Saudi Arabia, 1st edition, 1435-2014.
- 8.3 National Standards For Clinical laboratories and Blood Banks, 1st edition, 2015.
- 8.4 AABB Technical manual, 18th edition, 2014.
- 8.5 AABB Standards for Blood Banks and Transfusion Services, 30th edition, 2016.
- 8.6 Mollison's Blood Transfusion in Clinical Medicine; 12th edition, 2014.
- 8.7 Good Manufacturing Practice for Blood Establishments, Version 2.0, May 2019, Saudi FDA.

9. APPROVALS:

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